Central factor .....

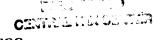
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		Application Number	09/964,390	)		
TRANSMITT	Filing Date	September	September 28, 2001			
	First Named Inventor	Larry D. W	Larry D. Woodring			
FORM  (to be used for all correspondence after initial filing)  Total Number of Pages in This Submission: 7		Art Unit	2642	2642		
		Examiner Name	Q. H. Nguy	Q. H. Nguyen		
		Attorney Docket Number	r BS01379	BS01379		
ENCLOSURES						
	(Check all I			·		
	(Officer aut	orat uppry)				
□ Fee Transmittal Form     □ Fee Attached      □ Amendment/Reply     □ After Final     □ Affidavits/declaration(s)      □ Extension of Time Request     □ Express Abandonment Request      □ Information Disclosure Statement     □ Certified Copy of Priority Document(s)     □ Response to Missing Parts/Incomplete Application     □ Response to Missing Parts under 37 CFR 1.52 or 1.53	□ Drawing(s) □ Ucensing-related Papers □ Petition □ Petition to Convert to a Provisional Application □ Power of Attorney, Revocation □ Change of correspondence Address □ Terminal Disclaimer □ Request for Refund □ CD, Number of CD(s) Remarks:		After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):			
SIGN	TURE OF APPLICAN	T. ATTORNEY, OR	AGENT			
Name (Print/Type)	Bambi Faivre Walters	<u></u>	Reg. No.:	45,197		
Signature	Bli Dale W	alter				
Date 1/10/むら						
CERTIFICATE OF TRANSMISSION / MAILING						
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, PO Box 1450, Alexandria, VA 22313-1450 on the date shown below.						
Name (Print/Type)	Maureen M. Pettine		Date	Date January 10; 2006		
Signature	gnature Maureen Mr. Gettine					

Signature

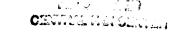
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FEE TRANSMITTAL			Filing Date		er 28, 2001		
for FY 2005  Applicant claims small entity status. See 37 CFR 1.27			First Named Inve				
			Examiner Name				
			Art Unit	2642			
				Attorney Docket	No. BS01379		
TOTAL AI	MOUNT OF PAYN	ENT	\$180.00	<u> </u>			E-11.
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☐ Check 🗵 Cre	dit Card 🔲 Money	Order None [	Other				
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⊠ Charge any add	ittional fee(s) or unde	arpayments of fee(s			□ Citodit any	Topophiono	
				E CALCULATION	<del> </del>		
1. BASIC FILING,	SEARCH, AND EX	AMINATION FEES			=	A B 416 ( A T 1 C)   T T T T T	•
	FILIN	G FEES	•	SEARCH FEES		AMINATION FEES	
Application Type	Fee (\$)	Small Entity Fee	Fee (\$)	Small Entity	Fee Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	<u>(\$)</u> 150	500	<u>(\$)</u> 250	200	100	<del></del>
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIN							
2. EXCESS CLAIN Fee Description	0 FEC3					Fee (\$)	Small Enty Fee (\$)
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HP≃highest numbe	r of independent clai	ms paid for, If great	er than 3.				<del></del>
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3 APPLICATION	er of independent clai SIZE FEE						
If the specification are	d drawings exceed 100 ) for each additional 50	) sheets of paper (exc	luding electronical	lly filed sequence or co	mputer listings under 37 CFR 1.16(s).	CFR 1.52(e)), the application	size tee due is \$250.00
(\$125 for small entity) Total Sheets	) ior each additional 50	sheets or traction the Extra Sheets	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.c (alt iVo) ai:0 o	and an all and a second	Fee (\$)	Fee Paid (\$)
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4. OTHER FEE(S)	)	_ <del></del>				•	Fee Paid (\$)
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Other (e.g., late filin	ng surcharge):	Supplemental ID	S Fee			Complete (if applicable	
SUBMITTED BY:	) Bambi F. Walt	ors	Registration I	No.	45,197	Telephone:	(757) 253-5729
Name (Print/Type)	, loanio e. Mac	<b>U</b> 0	L'ichion anon i		41	,	1 * *



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re	EIKA	NSMIT	IAL	Applicati	ion Number		09/964,390	<del></del>		
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					med inventor	ntor Larry D. V				
				Examine		Q. H. Nguye		ming		
				Art Unit		2642				
<u> </u>					Docket No.	BS01379				
TOTAL	AMOUNT OF PA	AYMENT	\$180.00			<del>, '</del>				
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Reissue	300	150	500	250		600		300		
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JBMITTED BY:		ZARRIOUGINGI IDO L	-23						180.00	
me (Print/Type)	Bambi F. Walte	rs R	egistration No.		45,197			e (If applicable)	(727) 020 5500	
	<u> </u>		ttorney/Agent)		77,187		Teleph	ane:	(757) 253-5729	
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